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Facilities Planning & Safety Unit

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Site Inspection Check List for:

Employees Facilities - OAR 333-535-0230

PR# \_\_\_\_\_ Date: \_\_\_\_\_ Inspector: \_\_\_\_\_

Provider: \_\_\_\_\_

Project: \_\_\_\_\_

Address: \_\_\_\_\_

Present at Site Inspection: \_\_\_\_\_

Intended Occupancy Date: \_\_\_\_\_

Required PRIOR to Approved Inspection:

RECEIVED?

YES NO NA

Certificate of Occupancy (CO) from governing jurisdiction

MEP Close-Out verification (if required)

SITE INSPECTION:

INTERIOR = Verify that the facility has installed:

EMPLOYEE FACILITIES:

YES NO NA

In addition to the employees' facilities such as locker rooms, lounges, toilets, or shower facilities called for in certain department, a sufficient number of such facilities as required to accommodate the needs of all personnel and volunteers shall be provided in accordance with the functional program. 333-535-0230